Residential Swimming Pool, Spa and Hot Tub Safety Act

Notice of Requirements

I (We) acknowledge that a new swimming pool, spa	or hot tub will be constructed or installed at
	nd hereby affirm that one of the following will be used
(Please Print Job Address) to meet the requirements of Chapter 15, Florida State	utes and Florida Building Code Sec 424.2.
☐ The pool will be equipped with an approved safet for Testing Materials (ASTM) standard F1346-91 (Sub	y pool cover that complies with the American Society omit Manufacturer's Specifications).
	e requirements of Florida Building Code Sec. 424.217 will he fence location and method of attachment, including aid of tools (Submit Manufacturer's Specifications).
	screen enclosure, child fence, masonry fence walls, chain meter. The plans must specify the type and location of all
☐ Any combination of protection which incorporates perimeter and all windows and doors must be equivalent Code Sec. 424.2.17.1.9 (Submit Manufacturer's Special Code Sec. 424.2.17.1.9)	ripped with exit alarms complying with Florida Building
locking installed a minimum 54" above the thresho	elf-latching device with positive mechanical latching/ bld. If this option is selected, submit plans showing all the plans must also show the location and type of all
In accordance with the Code, a final inspection of th with the Private Swimming Pool Safety Requirements, presumed unsafe.	ne pool project will not be approved without compliance and upon expiration of the permit, the pool shall be
I understand that not having one of the above installed Statutes, and will be considered as committing a missin Chapter 775, Florida Statutes.	ed will constitute a violation of Chapter 515, Florida demeanor of the second degree, punishable as provided
This form must be signed by the owner/agent and the	e prime contractor.
THE POOL SHALL NOT BE FILLED WITH WATER UNTIL THE HAVE PASSED, FBC 424.2.19.	FINAL ELECTRICAL AND ZONING (POOL BARRIER) INSPECTIONS
Owner's Signature	Prime Contractor's Signature
Owner's Name (please print)	Prime Contractor's Name (please print)
Date	Date
State of Florida Notary Public (FS 117.05.3.a)	State of Florida Notary Public (FS 117.05.3.a)
My Commission Evniros	My Commission Evoires